THE SELF-HELP PROGRAM FOR HIV/AIDS Application

When completing the form, applicants should:

- 1. Use block print and/or type the application.
- 2. Answer all questions completely.
- 3. Use a separate sheet of paper if necessary.
- 4. Send applications to:

United States Embassy, 2657 Avenue de la Gendarmerie, Kigali, Rwanda or electronically to: Rajkotiak@state.gov or WilliamR@state.gov

1. GENERAL INFORMATION

NAME OF PROJECT			
LOCATION	village or town	district	province
PROJECT			
LEADERSHIP			
(name of the person responsible for the project)			
CONTACT DETAIL	Phone number:	Email ad	dress:
FUNDING		RWF	
REQUESTED			

2. COMMUNITY BASED ORGANISATION

Name			
Address			
Starting date			
Number of	Women:	Men:	
members			
Description of		•	
your association			
(use separate sheet of			
paper, if necessary)			

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Current Activities		

• Has your association received or requested funding from the US Embassy or USAID in the past five years or from another donor?

If yes, provide the information on the donor's name, the amount granted, the year and the purpose of assistance:

• Is the association receiving funding from another donor at the current time?

If yes, provide the information on the donor's name, the amount granted, and the purpose of assistance:

3. PROJECT DESCRIPTION

DURATION OF THE PROJECT			
(time required to complete the project)			
NUMBER OF BENEFICIARIES	Direct:	Indirect:	
	Male:	Male:	
	Female:	Female:	
COMMUNITY CONTRIBUTION			RWF
(Money, materials, labor,			
etc.)			
(estimate the value of the community			
contribution in Rwandan Francs)			

Provide as attachment following information:

- **Project Summary:** Provide a concise description of project for which you are applying for funding.
- **Problem Statement:** Describe why the project is necessary and what problem or need the project will address.

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- **Impact:** Explain how the proposed project will improve the quality of life and benefit the target community.
- **Financial return:** If the project will generate income, describe how much income is expected, will control this revenue and how will it be used?
- **Sustainability:** Describe how the community will be able to carry on the activities without further assistance after completion of the self-help project.
- **Activities:** As of now, how much work has been done on the project? Who is doing the work? How much remains to be done? What is the project implementation timetable?
- Beneficiaries:
 - a) Number of Direct Beneficiaries for the Project:

Please estimate the number of direct beneficiaries. In calculating direct beneficiaries, please make sure that you only count each person once, i.e. do not include the same person in multiple categories.

Number of PLHA receiving services:

Number of Male OVC (under 18) receiving services:

Number of Female OVC (under 18) receiving services:

Number and type of Community Member (e.g., young women, sex workers, clients of sex workers, discordant couples) reached with prevention messages

b) Number of Indirect Beneficiaries for the Project:

These should be persons not directly receiving HIV/AIDS services, but other family or community members who will obtain some sort of benefit from the project. Please explain how the persons will indirectly benefit.

4. PROJECT FINANCES

Provide as attachment a detailed budget in Rwandan Francs (List all materials and expenses that will be needed to complete the project). Be specific in providing the details. Indicate which budget items are requested from the Self-Help Fund and which items will be provided by the group or community. Indicate, how much money has already been spent on the project and if other associations or government agencies have provided funds to the project.

Signature of Project Leader

Signature of Representative of Sector

For your application to be considered, please attach the following documents:

- 1. A detailed description of the project (information required in point 3)
- 2. A detailed budget in Rwandan Francs (as requested in point 4).
- 3. Copy of project bank account details, if available.
- 4. A detailed description of your cooperative, association.
- 5. Proof/certificate of your cooperative, association status, if available.
- 6. A map showing how to get to your project.
- 7. Other document that can support your application.